

MEMORANDUM

TO:

FROM:

DATE:

SUBJECT: Program Income

_____ **Fee** _____ **Rent** _____ **Proceeds from Sale of Land**

_____ **Loan Payment** _____ **UDAG Payment**

_____ **Other**

Amount _____ **Check** /**MO** /**Cash**

Check Number _____

Project Address _____

P.O. Number _____

Paid by: _____

Received by: _____

Date: _____

cc: Fiscal Transmittal Binder

PROGRAM INCOME PROCEDURES

- 1. IN NOVEMBER OR DECEMBER OF ANY GIVEN PROGRAM YEAR, A LETTER REMINDING THAT PROGRAM INCOME IS DUE WILL BE ISSUED TO ALL ACTIVE SUBRECIPIENTS. IF THE SUBRECIPIENT HAS BEEN ALLOWED TO RETAIN PROGRAM INCOME, THEY WILL BE INSTRUCTED TO SUBMIT A WRITTEN REPORT SPECIFYING THE ACTIVITIES WHICH GENERATED THE INCOME, THE AMOUNT OF INCOME RECEIVED. THEY WILL ALSO BE ISSUED A REMINDER THAT THE PROGRAM INCOME MUST BE UTILIZED BEFORE NEW CDBG FUNDS CAN BE DRAWN-DOWN AND THAT THE CITY'S PERMISSION IS REQUIRED FOR ANY NEW USE OF PROGRAM INCOME.**
- 2. TO ENSURE THAT ALL PROGRAM INCOME IS ACCURATELY RECEIVED AND RECORDED, ALL SUBRECIPIENTS WILL BE INSTRUCTED TO SUBMIT PAYMENT(S) TO THE HOUSING AND DEVELOPMENT SERVICES DIVISION. THEY WILL ALSO BE INSTRUCTED TO INCLUDE A TRANSMITTAL LETTER WHICH SPECIFIES THE CONTRACT AND ACTIVITY WHICH GENERATED THE INCOME. CHECKS, MONEY ORDERS AND OTHER PAYMENT INSTRUMENTS WILL BE REQUIRED TO HAVE THE PURCHASE ORDER NUMBER SO DESIGNATED.**
- 3. CLERICAL STAFF, IN CONJUNCTION WITH THE PROJECT MONITOR, WILL LOG THE PAYMENT ON THE ESTABLISHED SUBRECIPIENT LOG WITH APPROPRIATE NOTATIONS REGARDING WHETHER THE INCOME WAS RECEIVED BY THE CITY OR RETAINED BY THE SUBRECIPIENT.**
- 4. CLERICAL STAFF WILL HAND CARRY THE PAYMENT TO THE FISCAL SERVICES DIVISION. FISCAL SERVICES WILL BE REQUIRED TO INITIAL A FORM INDICATING RECEIPT OF THE PAYMENT. FISCAL WILL ALSO ADD THE INCOME PAYMENT TO THEIR MASTER LOG AT THIS TIME. (A COPY OF THE TRANSMITTAL FORM IS ATTACHED.)**
- 5. THE PROJECT MONITOR WILL REVIEW WHETHER THE CORRECT INCOME PAYMENT WAS RECEIVED OR REPORTED (IF RETAINED) AND WILL BRING ANY PROBLEMS OR DISCREPANCIES TO THE IMMEDIATE ATTENTION OF THE SECTION MANAGER.**
- 6. AT THE TIME OF THE GPR, THE SUBRECIPIENT LOG AND THE MASTER LOG WILL BE COMPARED (BY THE STAFF ASSIGNED TO PREPARATION OF THE GPR) FOR ANY POSSIBLE INCONSISTENCIES AND ANY REQUIRED CORRECTIONS.**

P.O.# _____

FUNDING ROUND _____

PORGRAM INCOME - SALES

ADDRESS: _____ UNITS: _____

DATE OF SALE: _____

PURCHASER NAME: _____

INCOME:

A. Sales Price \$ _____

COSTS:

B. Acquisition cost \$ _____

C. Rehabilitation cost _____

D. Total costs (B + C) _____

E. Net income (A - D) \$ _____

SOURCE OF FUNDS

F. CDBG funds in project \$ _____

G. Other funds in project _____

H. Total Funds (F + G) \$ _____

I. % CDBG (F/H) _____ %

J. Amount to be repaid \$ _____

The above information is true, to the best of my knowledge.

Contractor Representative

Date

P.O.# _____
FUNDING ROUND _____
REPORTING YEAR _____

PROGRAM INCOME - RENTAL

CONTRACTOR: _____

ADDRESS: _____ UNITS: _____

DATE LEASED: _____

INCOME

A. Monthly Rental \$ _____
B. Months Rented _____
C. Annual Rental (A + B) \$ _____

EXPENSES:

D. Debt Service \$ _____
E. Utilities
(If not paid by lessee) _____
F. Maintenance _____
G. Insurance _____
H. Property Taxes _____
I. Total Expenses _____
J. Net Income (C - I) \$ _____

SOURCE OF FUNDS:

K. CDBG funds in project \$ _____
L. Other funds _____
M. Total funds (K + L) \$ _____
N. % CDBG (K/M) _____ %
O. Amount to be repaid \$ _____
(J * N)

The above information is true, to the best of my knowledge.

Contractor Representative

Date